FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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hours per response 10.00	
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SEC US	SE ONLY
Prefix	Serial
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DATE R	ECEIVED
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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Sale of Series B Preferred Stock, conversion of convertible promissory notes and issuance of common stock Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	
Type of Filing: New Filing Amendment	· · · · · · · · · · · · · · · · · · ·
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	- '
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Modular Genetics, Inc.	W F ARRY D.
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Inc. 65 Cummings Park Woburn, MA 01801 (781) 376-0020	luding Area Code)
Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code) Telephone Number (Inc.)	luding Area Code)
Brief Description of Business	
Genetic research and related product development	PROCESSE
Type of Business Organization corporation	MAY 0 7 2004
Month Year Actual or Estimated Date of Incorporation or Organization: 0 6 0 0 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) DE	THOMSON FINANCIAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.5077d(6).	01 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed we and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that adwhich it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not maphotocopies of the manually signed copy or bear typed or printed signatures.	nually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E a not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in eare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice this notice and must be completed.	each state where sales proper amount shall
ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, appropriate federal notice will not result in a loss of an available state exemption unless such exemption is partial filing of a federal notice.	

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and r	nanagin	g partner o	f part	nership issuers.			_			
Check Box(es) that Apply:	X I	Promoter	×	Beneficial Owner	X	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Jarrell, Kevin Ph.D. Full Name (Last name first,	if indivi	dual)								
•		•								
65 Cummings Park Woburn, Business or Residence Addr			treet	City State Zin Co.	del					
Dusiness of Residence Addi	C22 (140	inoci anu s	oneet,	City, State, Zip Co	ucj					
Charle Day(a) that Annles			57	D		Tour auties Officer		Disastas		
Check Box(es) that Apply:	□,	Promoter	\boxtimes	Beneficial Owner	Ш	Executive Officer	\bowtie	Director	Ш	General and/or Managing Partner
Smith, Temple Ph.D.										
Full Name (Last name first,	if indivi	dual)								
65 Cummings Park Woburn, I	MA 018	01								
Business or Residence Addr			treet,	City, State, Zip Co	de)					
Check Box(es) that Apply:		Promoter	×	Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Rogers, William				·						
Full Name (Last name first,	if indivi	dual)								
c/o Choate, Hall & Stewart E										
Business or Residence Addr	ess (Nu	mber and S	treet,	City, State, Zip Coo	de)					
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
McGregor, Clyde										
Full Name (Last name first, i										
2 North LaSalle Street Suite :										
Business or Residence Addr	ess (Nui	mber and S	treet,	City, State, Zip Coo	ae)					
			_							
Check Box(es) that Apply:		Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director	LJ	General and/or Managing Partner
Harvard University										ividinaging i didici
Full Name (Last name first, i	f individ	dual)								
Office of Technology and Tra	demark l	Licensing 1	350 M	fassachusetts Avenue	Holy	oke 727, Cambridge	, MA	02138		
Business or Residence Addr						,				
Check Box(es) that Apply:		Promoter	X	Beneficial Owner		Executive Officer		Director		General and/or
	ш ⁻		KZ		ш		ш		نا	Managing Partner
Trustees of Boston University										
Full Name (Last name first, i	ı individ	ingi)								
Community Technology Fun							<u>–</u>			
Business or Residence Addr	ess (Nui	mber and S	treet,	City, State, Zip Coo	de)					
Check Box(es) that Apply:	I	romoter		Beneficial Owner		Executive Officer	\boxtimes	Director		General and/or Managing Partner
Brennan, Terrence Full Name (Last name first, i	f individ	iual)		· 		 				
c/o Boston University Comm	unity Te	chnology Fi	und 1	08 Bay State Road E	Boston	, MA 02115				
Business or Residence Addr						·				
	•			-						
		(Use blan	k shee	et, or copy and use a	dditio	nal copies of this she	et. as	necessary)		
		(· · · · · · · · · · · · · · · · · · ·			,			

	Town of the				B. INF	ORMATI	ON ABOU	T OFFER	ING	100		4 1 9	
1	Has the	issuer sol	d or does t	he issuer i	ntend to se	ll to non-	accredited	investors	in this offe	ering?		Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											LJ		
2. What is the minimum investment that will be accepted from any individual?										\$ 5,000.00			
										Yes	No		
3.	3. Does the offering permit joint ownership of a single unit?									•••••	\boxtimes		
4.	commis If a pers or states	sion or sim son to be lis s, list the na	ion requested ital remuner ted is an assume of the brayou may se	ation for so ociated per roker or de	olicitation of son or ager aler. If mor	of purchase nt of a brok re than five	ers in conne der or dealer e (5) person	ction with a r registered s to be liste	sales of sec with the S ed are asso	curities in the EC and/or	ne offering. with a state		
	`	Last name	first, if indi	vidual)									
N/A		Residence	Address (N	umber and	Street Cit	v State 7	'in Code)						
Dus	stiless of	Residence	Address (14	umoer and	Jucci, Cit	y, State, 2	ip code)						
Nar	ne of Ass	sociated Br	oker or Dea	ler								-	
Sta	tes in Wh	nich Person	Listed Has	Solicited of	or Intends	to Solicit l	Purchasers						
	(Check	"All States	" or check i	ndividual S	States)			••••••	•••••				States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (l	Last name	first, if indi	vidual)		<u></u>	<u></u>						
Bus	siness or	Residence	Address (N	umber and	Street, Ci	ty, State, 2	Zip Code)						
<u> </u>			oker or Dea	1									
Nai	ne of Ass	sociated Br	oker or Dea	ner									
Sta	tes in Wh	ich Person	Listed Has	Solicited of	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check i	individual	States)							☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (l	Last name	first, if indi	vidual)								,	
Bus	siness or	Residence	Address (N	umber and	Street, Ci	ty, State, 2	Zip Code)					HP.	
Nar	ne of Ass	sociated Br	oker or Dea	ıler				<u>.</u> <u>.</u>					
		·											
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)									States				
	IL	IN	IA	KS	KY	LA	ME	MD	MA MA	FL MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security	Aggregate Offering Price	Ai	mount Already Sold
	Debt	0.00	\$	0.00
	Equity		-	944,000.00
	☐ Common ☐ Preferred	3,113,110100		21,3000.00
	Convertible Securities (including warrants)	0.00	\$	0.00
	Partnership Interests		`-	0.00
	Other (Specify		_	0.00
	Total		_	944,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Oollar Amoun of Purchases
	Accredited Investors	12	\$_	944,000.00
	Non-accredited Investors	0	\$_	0.00
	Total (for filings under Rule 504 only)	12	\$_	944,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.			
	Type of Offering	Type of Security	D	ollar Amoun Sold
	Rule 505	0	\$_	0.00
	Regulation A	0	\$_	0.00
	Rule 504	0	\$	0.00
	Total	0	\$	0.00
	The state of the s		_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is		\$	
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_	\$ \$	
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees		_	75,000.00
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs		_	75,000.00
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees		\$ \$	75,000.00
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately)		\$ \$	75,000.00
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees		\$ \$	75,000.00
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately)		\$ \$	75,000.00 75,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	and total expenses furnished in response to Part C-	ering price given in response to Part C—Question 1—Question 4.a. This difference is the "adjusted gros	s	\$_5,068,140.00
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Paragraphics.	ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gros	i	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		S	
	Purchase of real estate		s	s
	Purchase, rental or leasing and installation of ma	nchinery	□ s	s
	Construction or leasing of plant buildings and fa	acilities	s	s
	Acquisition of other businesses (including the va offering that may be used in exchange for the as	sets or securities of another		
	Other (specify):		s	. 🗀 🤋
			\$	s
	Column Totals		s	\$ 5,068,140.00
	Total Payments Listed (column totals added)		· 🛮 🖾 \$	5,068,140.00
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the signed by the issuer to find information furnished by the issuer to any non-ac	urnish to the U.S. Securities and Exchange Commi	ission, upon writte	
SS	er (Print or Type)	Signature///	Date	0004
	dular Genetics, Inc.	MUNIMA - 1	April 26,	2004
Va	nel of Signer (Print or Type)	Title of Signer (Print or Type)		
	liam C. Rogers, Esq.	Secretary		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)